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PTO/SB/01 (10-00)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing

OR

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                          |          |
|--------------------------|----------|
| Attorney Dock Number     | A070 US  |
| First Named Inventor     | Browning |
| <b>COMPLETE IF KNOWN</b> |          |
| Application Number       |          |
| Filing Date              |          |
| Group Art Unit           |          |
| Examiner Name            |          |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BAFF, Inhibitors Thereof and Their Use in the Modulation of B-Cell Response

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
|                                     |         |                                  | <input type="checkbox"/> | YES                      | NO                       |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

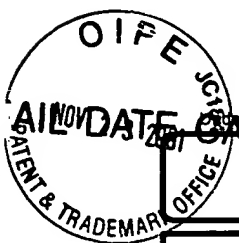
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

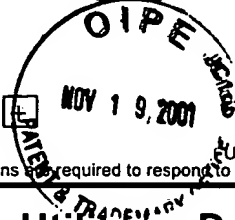
| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| 60/117,169            | 01/25/1999               |  |
| 60/143,228            | 07/09/1999               |  |

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below

Name Timothy P. Linkkila

Address BIOGEN, INC.

Address 14 Cambridge Center

City Cambridge

State MA

ZIP 02142

Country USA

Telephone (617) 679-3795

Fax (617) 679-2838

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Jeffrey  
(first and middle [if any])

Family Name Browning  
or Surname

Inventor's  
Signature

Date

Residence: City Brookline

State MA

Country 02146

Citizenship US

Mailing Address 32 Milton Road

Mailing Address

City Brookline

State MA

ZIP 02146

Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Christine  
(first and middle [if any])

Family Name Ambrose  
or Surname

Inventor's  
Signature

Date

Residence: City Reading

State MA

Country US

Citizenship US

Mailing Address 197 Wakefield Street

Mailing Address

City Reading

State MA

ZIP 01867

Country US

☐ Additional inventors are being named on the \_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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|--------------------|---|
| <b>DECLARATION</b> | <b>ADDITIONAL INVENTOR(S)</b><br><b>Supplemental Sheet</b><br>Page <u>1</u> of <u>1</u> |
|--------------------|---|

|   |                                    |       |  |   |        |             |    |
|---|------------------------------------|-------|--|---|--------|-------------|----|
| <b>Name of Additional Joint Inventor, if any:</b> |                                    |       |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |        |             |    |
| Given Name (first and middle (if any))            |                                    |       |  | Family Name or Surname  |        |             |    |
| Fabienne  |                                    |       |  | MacKay  |        |             |    |
| Inventor's Signature                              | <i>Fabienne MacKay</i>             |       |  | 11/18/2001  |        | Date        |    |
| Residence: City                                   | Vaocluse                           | State |  | Country   | AU     | Citizenship | AU |
| Post Office Address                               | 1 Belah Gardens, Vaocluse NSW 2030 |       |  |   |        |             |    |
| Post Office Address                               |                                    |       |  |   |        |             |    |
| City  | Vaocluse                           | State |  | ZIP   | 2030   | Country     | AU |
| <b>Name of Additional Joint Inventor, if any:</b> |                                    |       |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |        |             |    |
| Given Name (first and middle (if any))            |                                    |       |  | Family Name or Surname  |        |             |    |
| Jurg  |                                    |       |  | Tschopp   |        |             |    |
| Inventor's Signature                              |                                    |       |  |   |        | Date        |    |
| Residence: City                                   | Epalinges                          | State |  | Country   | CH     | Citizenship | CH |
| Post Office Address                               | 10, chemin des Fontanins, CH-1066  |       |  |   |        |             |    |
| Post Office Address                               |                                    |       |  |   |        |             |    |
| City  | Epalinges                          | State |  | ZIP   | CH1066 | Country     | CH |
| <b>Name of Additional Joint Inventor, if any:</b> |                                    |       |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |        |             |    |
| Given Name (first and middle (if any))            |                                    |       |  | Family Name or Surname  |        |             |    |
| Pascal  |                                    |       |  | Schneider   |        |             |    |
| Inventor's Signature                              |                                    |       |  |   |        | Date        |    |
| Residence: City                                   | Epalinges                          | State |  | Country   | CH     | Citizenship | CH |
| Post Office Address                               | University of Lausanne, CH-1066    |       |  |   |        |             |    |
| Post Office Address                               |                                    |       |  |   |        |             |    |
| City  | Epalinges                          | State |  | ZIP   | CH1066 | Country     | CH |

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| Fabienne  |                                    |   |  | MacKay                 |        |             |              |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |              |
| Residence: City                                   | Vaocluse                           | State   |  | Country                | AU     | Citizenship | AU           |
| Post Office Address                               | 1 Belah Gardens, Vaocluse NSW 2030 |   |  |                        |        |             |              |
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| Given Name (first and middle (if any))            |                                    |   |  | Family Name or Surname |        |             |              |
| Jurg  |                                    |   |  | Tschopp                |        |             |              |
| Inventor's Signature                              | <i>J. Tschopp</i>                  |   |  |                        |        | Date        | Oct 31, 2001 |
| Residence: City                                   | Epalinges                          | State   |  | Country                | CH     | Citizenship | CH           |
| Post Office Address                               | 10, chemin des Fontanins, CH-1066  |   |  |                        |        |             |              |
| Post Office Address                               |                                    |   |  |                        |        |             |              |
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| Pascal  |                                    |   |  | Schneider              |        |             |              |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |              |
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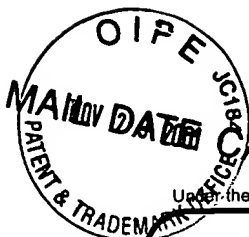
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

|   |                                    |   |  |                        |        |             |            |
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| Fabienne  |                                    |   |  | MacKay                 |        |             |            |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |            |
| Residence: City                                   | Vauchuse                           | State   |  | Country                | AU     | Citizenship | AU         |
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| Jurg  |                                    |   |  | Tschopp                |        |             |            |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |            |
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| Given Name (first and middle (if any))            |                                    |   |  | Family Name or Surname |        |             |            |
| Pascal  |                                    |   |  | Schneider              |        |             |            |
| Inventor's Signature                              | <i>P. Schneider</i>                |   |  |                        |        | Date        | 10/31/2001 |
| Residence: City                                   | Epalinges                          | State   |  | Country                | CH     | Citizenship | CH         |
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| Attorney Docket Number   | A070 US  |
| First Named Inventor     | Browning |
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| Application Number       |          |
| Filing Date              |          |
| Group Art Unit           |          |
| Examiner Name            |          |

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BAFF, Inhibitors Thereof and Their Use in the Modulation of B-Cell Response

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| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed   | Certified Copy Attached?<br>YES NO   |
|-------------------------------------|---------|----------------------------------|--|--|
|                                     |         |                                  | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> | <input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/><br><input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:

☐Customer Number  
or Bar Code LabelOR ☒

Correspondence address below

Name

Timothy P. Linkkila

Address

BIOGEN, INC.

Address

14 Cambridge Center

City

Cambridge

State

MA

ZIP

02142

Country

USA

Telephone

(617) 679-3795

Fax

(617) 679-2838

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐

A petition has been filed for this unsigned inventor

Given Name Jeffrey  
(first and middle [if any])Family Name  
or Surname

Browning

Inventor's  
Signature

Date

Residence: City

Brookline

State

MA

Country

02146

Citizenship

US

Mailing Address

32 Milton Road

Mailing Address

City

Brookline

State

MA

ZIP

02146

Country

US

NAME OF SECOND INVENTOR:

☐

A petition has been filed for this unsigned inventor

Given Name Christine  
(first and middle [if any])Family Name  
or Surname

Ambrose

Inventor's  
Signature

Date

Residence: City

Reading

State

MA

Country

US

Citizenship

US

Mailing Address

197 Wakefield Street

Mailing Address

City

Reading

State

MA

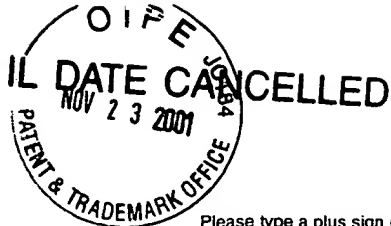
ZIP

01867

Country

US

☐ Additional inventors are being named on the \_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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## DECLARATION

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

|   |                                    |   |  |                        |        |             |    |
|---|------------------------------------|---|--|------------------------|--------|-------------|----|
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| Fabienne  |                                    |   |  | MacKay                 |        |             |    |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |    |
| Residence: City                                   | Vaocluse                           | State   |  | Country                | AU     | Citizenship | AU |
| Post Office Address                               | 1 Belah Gardens, Vaocluse NSW 2030 |   |  |                        |        |             |    |
| Post Office Address                               |                                    |   |  |                        |        |             |    |
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| Jurg  |                                    |   |  | Tschopp                |        |             |    |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |    |
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| Pascal  |                                    |   |  | Schneider              |        |             |    |
| Inventor's Signature                              |                                    |   |  |                        |        | Date        |    |
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